

October 24, 2003

Updates: SARS, Listeria, Influenza

Dear Colleagues:

CDC has released the guidance for response to SARS, if and when it should reappear. The complete guidance from CDC can be found on their website (www.cdc.gov/ncidod/sars/). At MDCH, we are working on informational material and guidelines specific to Michigan for use in clinical laboratories. Until we have provided that guidance, please keep in mind that **no specimens for SARS testing should be sent to MDCH until contact has been made with the Bureau of Epidemiology (517-335-8165), as no testing will take place without their review of patient exposure, signs and symptoms.** Also, while commercial laboratories may offer testing for this agent, it is important to remember that no commercial reagents have been thoroughly validated against patient samples. Results from commercial tests will not be accepted as evidence of disease, or the lack thereof; only testing performed by public health laboratories will be used to confirm or eliminate cases.

Once again a recall of soft-ripened cheese is underway, prompted by recovery of *Listeria monocytogenes* from samples of the product; no illness in humans has yet been linked to the product. This follows soft-ripened cheese recalls in September and earlier this month. Specifics on this most recent recall may be found at the FDA website(www.fda.gov/oc/po/firmrecalls/ashecounty10_03.html). This is an opportune time to remind clinical colleagues of our need at MDCH to receive all clinical isolates of *Listeria*. We recognize this is a burden on already busy clinical laboratories, but recognition of contaminated products, and its removal from grocery store shelves, often depends upon the ability of public health to compare PFGE patterns of isolates recovered from different patients. We cannot overstate the importance of your isolates of *Listeria*, as well as *Salmonella*, *Shigella*, *E.coli* O157:H7, to the effort of keeping our food safe.

Finally, it appears the influenza season has begun. CDC has noted reports of influenza A in Texas, Alaska, Wisconsin, Connecticut, New Hampshire, New York, Louisiana, Washington, Hawaii and the District of Columbia. Influenza vaccination is encouraged for children aged 6 to 23 months, as well as their household contacts and out-of-home caregivers, due to the increased risk of influenza-related hospitalization of young children. Vaccination will be recommended for this group in 2004-2005.

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